

DEPARTMENT OF THE NAVY

NAVAL MEDICAL COMMAND WASHINGTON, D.C. 20372-5120

> NAVMEDCOMINST 5728.1A MEDCOM-00D4 20 May 1987

IN REPLY BEEFR TO

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NAVMEDCOM INSTRUCTION 5728.1A

From: Commander, Naval Medical Command

Subj: PUBLIC AFFAIRS POLICY WITHIN THE NAVAL MEDICAL COMMAND

Ref:

- (a) SECNAVINST 5720.44
- (b) OPNAVINST 3100.6D
- (c) NAVMEDCOMINST 5600.1
- (d) NAVMEDCOMINST 5721.1B
- (e) OPNAVINST 5214.7
- 1. <u>Purpose</u>. To set up procedures and provide guidance for the conduct of the public affairs program within the Naval Medical Command (NAVMEDCOM).
- 2. Cancellation. NAVMEDCOMINST 5728.1.
- 3. Background. Public affairs is a management function which researches and evaluates the attitudes of the public, examines the policies of the organization with regard to the public interest, and plans and executes a program of action to earn public understanding and acceptance. For the Naval Medical Command, public affairs is also the sum total of all the means used to influence public opinion, communicate with internal and external audiences, and provide public recognition for the achievements of Navy Medicine and its personnel.
- 4. Mission. The public affairs mission of the Naval Medical (A Command is to support the policies and objectives of the Chief of Naval Operations; the Director, Naval Medicine; and Commander, Naval Medical Command with programs which communicate the competence and quality of Navy medicine and its personnel, to provide proper recognition, and to communicate with all publics internal and external.
- 5. Goals. The goals of the Naval Medical Command public affairs program are:
- a. To promote confidence of the American people in the United States Navy Medical Department and support Navy and Marine Corps readiness goals through programs which communicate the excellence of Navy medical and dental practice, research, and readiness.
- b. To effectively communicate information which supports the overall goals of the Naval Medical Command in providing care to the various authorized beneficiary groups.

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- c. To help in the upgrading of patient-provider relationships at the command and individual levels by advising in areas of interpersonal relations and sensitivity training for all patient contact personnel.
- d. To increase awareness and understanding of Medical Department operations as a function of overall military readiness and morale by active communication with operational and line commanders.
- e. To promote Medical Department recruiting and improve morale within COMNAVMEDCOM through a continuing program designed to highlight the excellence of Navy medical care and research and training programs.
- f. To provide timely, concise, and accurate information to the media when appropriate.
- g. To maintain an active and aggressive internal public affairs program to keep staff members and their dependents fully informed of command activities and overall Navy policies and programs.
- h. To maintain an active involvement and communication with local civic organizations, medically-related societies, and other interested groups.
- A) 6. Organization. The organization of COMNAVMEDCOM public affairs follows the COMNAVMEDCOM chain of command.
 - a. Echelon four coprincipal duty public affairs officers (PAO) are responsible for the execution of external and internal public affairs programs dealing with issues and audiences within their sphere of cognizance, and for keeping their respective echelon three public affairs officers informed of those issues or events which transcend the local command's area of responsibility.
 - b. Echelon three public affairs officers are responsible for the execution of external and internal public affairs programs dealing with issues and audiences within their sphere of cognizance, assisting with and supervising the public affairs efforts of their subordinate commands, and for keeping the COMNAVMEDCOM Special Assistant for Public Affairs (MEDCOM-00D4) informed on those issues or events which transcend the echelon three command's areas of responsibility.
 - c. The COMNAVMEDCOM Special Assistant for Public Affairs (MEDCOM-00D4) is responsible for the overall public affairs policy, plans, and programs for the Naval Medical Command and its subordinate commands. The COMNAVMEDCOM PAO is responsible for public affairs matters which involve those issues under the aegis of the Naval Medical Command and which are of a commandwide, Navy-wide, or national issue nature.

7. Action

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- a. Commanding officers and officers in charge (OIC) of all echelon four commands will:
- Appoint, in writing, public affairs officers for their (1)respective commands. Officers in command or their deputies should not act as a public affairs officer. In selecting a public affairs officer, officers in command should consider the officer's maturity, knowledge of the Navy and of Navy medicine, aptitude, and capability. The selectee should, whenever possible, receive basic public affairs officers training at the Defense Information School, Fort Benjamin Harrison, IN. Assistance in arranging quotas for this training can be obtained from COMNAVMEDCOM Public Affairs (MEDCOM-00D4). Public affairs officers at echelon four commands are considered "coprincipal duty" public affairs officers vice "collateral duty" in recognition that public affairs shares importance as a primary duty. Public affairs officers assigned to the staffs of geographic commanders are 1650 designator officers (special duty public affairs officers) detailed by the Naval Military Personnel Command.
- (2) Ensure public affairs officers are on the executive staff, reporting to the commander, commanding officer or OIC through the chief of staff, executive officers, or assistant OIC.
 - b. Public affairs officers will:
- (1) Familiarize themselves with the contents and guidance of references (a) through (d).
- (2) Provide timely, concise, and accurate information to local media when proper. Queries from national media will be quickly coordinated through the chain of command.
- (3) Tell the chain of command immediately of all incidents which have even the slightest possibility of media attention. Public affairs officers will provide a proper press line for each event calling for an Operational Report (OPREP). The press line consists of a statement and possible questions and appropriate answers. The press line will be transmitted to COMNAVMEDCOM as soon after the transmission of the OPREP as possible.
- (4) Exploit every opportunity to publicize the excellence of Navy medical and dental practice, research and readiness in local publications, and through the chain of command, in media of wider coverage.
- (5) Communicate information on local actions which impact on providing care to the various authorized beneficiary groups to those beneficiary groups. Communication of programs which have regional or national impact or media interest must be coordinated with the chain of command.

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- (6) Communicate information on local actions which impact on providing care to the various authorized beneficiary groups to the local line and operational commanders. Communication of programs which have regional or national impact or media interest must be coordinated with the chain of command.
- (7) Actively engage in a continuing program to highlight and publicize the achievements of the staff of the local command through the Fleet Home Town News Program, and through submissions to NAVY MEDICINE.
- (8) Operate and maintain an internal public affairs program to keep staff members and their dependents fully informed of command activities and overall Navy policies and programs.
- (9) Maintain an active involvement with local civic organizations, medically-related societies, and other interested groups. Public affairs officers will assist their commanding officers in establishing a rapport with these groups and in securing opportunities to speak before them.
- (10) Aid in the upgrading of patient-provider relationships at the command and individual levels by providing advice in interpersonal relations and sensitivity training for all patient contact personnel. Public affairs officers should work closely with patient affairs officers, patient contact representatives, health benefits advisors, and quality assurance personnel in this effort.
- A) 8. Reports. The requirements contained in paragraph 7 are exempt from reports control by reference (e), Part IV, paragraph G7.

Distribution:

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